

IN THE UNITED STATES DISTRICT COURT
FOR THE WESTERN DISTRICT OF MISSOURI
WESTERN DIVISION

Lynnda Harris Williams

**Complaint for Employment
Discrimination**

Case No. 20-CV-00058-GAF
(to be filled in by the Clerk's Office)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-against-

Sunlife Financial

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

REQUEST FOR TRIAL BY JURY

Plaintiff requests trial by jury. ☐ Yes ☒ No

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address

Lynna Harris-Williams
723 Walnut #301
Kansas City MO 64106
JACKSON
816 589 0122
lharriswilliams@gmail.com

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name

Job or Title
(if known)

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address
(if known)

Sunlife Financial
2323 GRAND AVENUE
KANSAS CITY JACKSON
MISSOURI 64106

Defendant No. 2

Name

Job or Title
(if known)

Street Address

City and County

State and Zip Code _____

Telephone Number _____

E-mail Address _____
(if known)

C. Place of Employment

The address at which I sought employment or was employed by the defendant(s) is:

Name

Sunlife Financial

Street Address

2323 GRAND AVENUE

City and County

KANSAS CITY MO 64108

State and Zip Code

JACKSON

Telephone Number _____

II. Cause of Action

This action is brought for discrimination in employment pursuant to (check all that apply):



Title VII of the Civil Rights Act of 1964, as codified, 42 U.S.C. §§ 2000e to 2000e-17 (race, color, gender, religion, national origin).

(Note: In order to bring suit in federal district court under Title VII, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)



Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C. §§ 621 to 634.

(Note: In order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file a charge with the Equal Employment Opportunity Commission.)



Americans with Disabilities Act of 1990, as codified, 42 U.S.C. §§ 12112 to 12117.

(Note: In order to bring suit in federal district court under the Americans with Disabilities Act, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)

- ☐ Other federal law (*specify the federal law*):

- ☐ Missouri Human Rights Act, Missouri Revised Statute § 213.055
- ☐ Other state law (*specify, if known*):

- ☐ Relevant city or county law (*specify, if known*):

III. Administrative Procedures

- A. Did you file a charge of discrimination against Defendant(s) with the Equal Employment Opportunity Commission or other federal agency?

☒ Yes Date filed: 10/17/19
☐ No

Attach copy of the charge to this Complaint

- B. Have you received a Notice of Right-to-Sue Letter from the Equal Employment Opportunity Commission?

☒ Yes ☐ No

If yes, please attach a copy of the letter to this Complaint.

- C. Did you file a charge of discrimination against Defendant(s) with the Missouri Commission on Human Rights?

☐ Yes Date filed: _____
☒ No

Attach copy of the charge to this Complaint

- D. Have you received a Notice of Right-to-Sue Letter from the Missouri Human Rights Commission?

☒ Yes ☐ No

If yes, please attach a copy of the letter to this Complaint.

E. If you are claiming **age discrimination**, check one of the following:

☒ 60 days or more have passed since I filed my charge of age discrimination with the Equal Employment Opportunity Commission.

☐ fewer than 60 days have passed since I filed my charge of age discrimination with the Equal Employment Opportunity Commission

IV. Statement of Claim

A. The discriminatory conduct of which I complain in this action includes (*check all that apply*):

- ☐ Failure to hire me.
- ☐ Termination of my employment.
- ☐ Failure to promote me.
- ☐ Failure to accommodate my disability.
- ☐ Unequal terms and conditions of my employment.
- ☐ Retaliation.
- ☒ Harassment/Hostile Work Environment
- ☐ Other acts (*specify*): _____

(*Note: Only those grounds raised in the charge filed with the Equal Employment Opportunity Commission can be considered by the federal district court under the federal employment discrimination statutes.*)

B. It is my best recollection that the alleged discriminatory acts occurred on the following date(s):

these acts have been 2016 and are on going

C. I believe that defendant(s) (*check one*):

- ☒ is/are still committing these acts against me.
- ☐ is/are not still committing these acts against me.

D. Defendant(s) discriminated against me based on my (check all that apply and explain):



race

Black



color



gender/sex



religion



national origin



age. My year of birth is 1955. (Give your year of birth only if you are asserting a claim of age discrimination.)



disability or perceived disability (specify disability)

DISEASE THAT REQUIRES ME TO GO TO THE BATHROOM WHEN MY BODY IS IN ACES

E. Write a short and plain statement of FACTS that support your claim. Do not make legal arguments. You must include the following information:

- What happened to you? - I'm harassed for my time in the bathroom stating it hurt my co-workers
- What injuries did you suffer? Humiliation - Degrading Dehumanizing
- Who was involved in what happened to you? - IN AN ASSESSMENT CHRIS HARPER INVOLVED WITH MANAGERS WHO HAD THE TASK OF WATCHING THE TELEPHONE
- How were the defendants involved in what happened to you? I WOULD RECEIVE MESSAGES ACROSS THE COMPUTER SYSTEM ASKING ME WHAT I WAS UP TO ON THE TELEPHONE
- Where did the events you have described take place? IN THE WORKPLACE AT SUNLIFE
- When did the events you have described take place?

If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

② SINCE MY FIRST REVIEW I EXPLAINED TO WANTED TO BE TRAINED IN ALL ASPECTS OF THE JOB. I WAS TOLD I WOULD BE TRAINED, AND WAS TRAINED IN A GROUP WITH 2 OTHERS THAT DATE SINCE CAME ON TO OTHER DEPARTMENTS ON QUE 5 AND 13. IN 2018 I REQUESTED TO WORK OVER TIME I WAS TOLD I HAD NOT BEEN FORMALLY TRAINED AND DENIED THE OVERTIME. IN 2019 I LEARNED A YOUNGER WHITE GIRL RECEIVED ALL OF THE TRAINING I HAD BEEN REQUESTING. THEY WERE GIVEN ACCESS TO ALL SYSTEMS TO COMPLETE THE TRAINING.

③ I HAVE BEEN HARASSED ABOUT THE VOLUME OF MY VOICE ON THE TELEPHONE BECAUSE THE PERSON ON THE OTHER END IS UNABLE TO HEAR ME. I HAVE BEEN REPORTING THE TELEPHONE SINCE DECEMBER OF 2017.

④ I HAVE BEEN HARASSED ABOUT THE LENGTH OF MY DRESS DURING 2019 THE SAME DRESSES I HAVE BEEN WEARING SINCE 2016.

V. Relief

As relief from the allegations of discrimination as stated above, Plaintiff prays that the court grant the following relief to Plaintiff: (check any and all that apply)

☐ Defendant be directed to employ Plaintiff

☐ Defendant be directed to re-employ Plaintiff

☐ Defendant be directed to promote Plaintiff

☐ Defendant be directed to _____

☒ Monetary damages (please explain): to cover humiliation-shame

☐ As additional relief to make Plaintiff whole, Plaintiff seeks (please specify and explain):

dehumanization denigration I have suffered. Talking to management has not helped. The continued calls per hour is used against you to prevent promotions working overtime pay increases.

VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 1/12/20

Signature of Plaintiff [Signature]

Printed Name of Plaintiff Lyndee Harris Williams